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STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) & 1.27(d))--NONPROFIT ORGANIZATION	Docket Number (Optional) 95-1514
 Applicant, Patentee, or Identifier: <u>R. Beelman et al.</u> Application or Patent No.: _____ Filed or Issued: <u>July 5, 2001</u> Title: <u>PRESERVATION COMPOUNDS AND METHODS FOR MUSHROOMS</u>	
 I hereby state that I am an official empowered to act on behalf of the nonprofit organization identified below: NAME OF NONPROFIT ORGANIZATION <u>The Penn State Research Foundation</u> ADDRESS OF NONPROFIT ORGANIZATION <u>304 Old Main</u> <u>University Park, PA 16802</u>	
 TYPE OF NONPROFIT ORGANIZATION: <input type="checkbox"/> UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION <input checked="" type="checkbox"/> TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3)) <input type="checkbox"/> NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA (NAME OF STATE _____) (CITATION OF STATUTE _____) <input type="checkbox"/> WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3)) IF LOCATED IN THE UNITED STATES OF AMERICA <input type="checkbox"/> WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA (NAME OF STATE _____) (CITATION OF STATUTE _____)	
 I hereby state that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees to the United States Patent and Trademark Office regarding the invention described in: <input checked="" type="checkbox"/> the specification filed herewith with title as listed above. <input type="checkbox"/> the application identified above. <input type="checkbox"/> the patent identified above.	
 I hereby state that rights under contract or law have been conveyed to and remain with the nonprofit organization regarding the above identified invention. If the rights held by the nonprofit organization are not exclusive, each individual, concern, or organization having rights in the invention must file separate statements as to their status as small entities and that no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).	
 Each person, concern, or organization having any rights in the invention is listed below: <input checked="" type="checkbox"/> no such person, concern, or organization exists. <input type="checkbox"/> each such person, concern, or organization is listed below.	
 I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))	
 NAME OF PERSON SIGNING <u>Livinia N. Jones (Recognized under 37 CFR § 10.9(b))</u> <u>Pamela A. Ruest (Reg. No. 40,795)</u>	
 TITLE IN ORGANIZATION OF PERSON SIGNING <u>Attorney with McQuaide Blasko, Inc.</u>	
 ADDRESS OF PERSON SIGNING <u>811 University Drive, State College, Pennsylvania 16801-6699</u>	
 SIGNATURE <u>Pamela A. Ruest</u> DATE <u>July 5, 2001</u>	

Burden Hour Statement This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

COMBINED REISSUE APPLICATION DECLARATION BY THE INVENTOR
AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is described and claimed in patent number 5,919,507, granted July 6, 1999 and for which a reissue patent is sought on the invention entitled:

PRESERVATION COMPOSITIONS AND METHODS FOR MUSHROOMS

the specification of which

(Check one) ☒ is attached hereto.

☐ was filed on _____ as reissue application number _____ / _____
and was amended on _____ (if applicable).

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56.

I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.

☒ by reason of the patentee claiming more or less than he had the right to claim in the patent.

☐ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

Applicants' attorney failed to appreciate the full scope of applicants' invention. The invention set forth in claim 1, the sole independent claim in the patent, unduly limits the pH-neutralizing solution used in the second stage washing step(s) to a preferred embodiment of buffer solutions of erythorbic acid and sodium erythorbate. The invention described and enabled in the specification is not limited to the use of erythorbic acid/sodium erythorbate buffer solutions to return the final mushroom pH to the physiological range of approximately 6.5. As described in the specification, acidulants and even water alone were used to neutralize the effects of exposure to high pH antimicrobial solutions in the first stage.

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant. As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith.

John P. Blasko, Esq.

(Reg. No. 31,149)

Pamela A. Ruest, Esq.

(Reg. No. 40,795)

Livinia N. Jones, Esq.

(Recognized under 37 CFR § 10.9(b))

Address all telephone calls to J. P. Blasko at telephone no. (609) 895-6639; facsimile (609) 896-1469.

Address all correspondence to

J. P. Blasko, Esq.
Fox, Rothschild, O'Brien & Frankel, LLP
Princeton Pike Corporate Center
997 Lenox Drive, Building 3
Lawrenceville, NJ 08648-2311

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole or first inventor (given name, family name): Robert B. Beelman

Inventor's signature: _____ Date: _____

Residence: State College, Pennsylvania Citizenship: USA

Post Office Address: 718 Cornwall Drive, State College, Pennsylvania 16803

Full name of second joint inventor, if any (given name, family name): Eric M. Duncan

Inventor's signature: _____ Date: _____

Residence: York, Pennsylvania Citizenship: USA

Post Office Address: Flat F, Arun Court Amethyst Lane, Reading, Berkshire England RG302EZ

Full name of third joint inventor, if any (given name, family name): _____

Inventor's signature: _____ Date: _____

Residence: _____ Citizenship: _____

Post Office Address: _____

Full name of fourth joint inventor, if any (given name, family name): _____

Inventor's signature: _____ Date: _____

Residence: _____ Citizenship: _____

Post Office Address: _____

Full name of fifth joint inventor, if any (given name, family name): _____

Inventor's signature: _____ Date: _____

Residence: _____ Citizenship: _____

Post Office Address: _____

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REISSUE APPLICATION: CONSENT OF ASSIGNEE; STATEMENT OF NON-ASSIGNMENT		Docket Number (Optional) 95-1514
This is part of the application for a reissue patent based on the original patent identified below.		
Name of Patentee(s) Robert B. Beelman, Eric M. Duncan		
Patent Number	5,919,507	Date Patent Issued July 6, 1999
Title of Invention Preservation Compositions and Methods for Mushrooms		
<p>1. <input checked="" type="checkbox"/> Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)</p> <p>2. <input type="checkbox"/> Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.</p> <p>One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".</p> <p>The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.</p>		
The assignee(s) owning an undivided interest in said original patent is/are <u>The Penn State Research Foundation</u> , and the assignee(s) consents to the accompanying application for reissue.		
Name of assignee/inventor (if not assigned)		
Signature	<u>Ronald J. Huss</u>	Date <u>7/2/01</u>
Typed or printed name and title of person signing for assignee (if assigned) Ronald J. Huss, Director, Intellectual Property Office		

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Robert B. Beelman, Eric M. DuncanApplication No./Patent No.: 5,919,507 Filed/Issue Date: July 6, 1999Entitled: Preservation Compositions and Methods for MushroomsThe Penn State Research Foundation, a University
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame 0170, or for which a copy thereof is attached. 009339

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.
[NOTE: A separate copy of the original assignment document or a true copy of the original document must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

7/2/01
Date

Ronald J. Huss

Typed or printed name

Ronald J. Huss
Signature

Director, Intellectual Property
Title Office